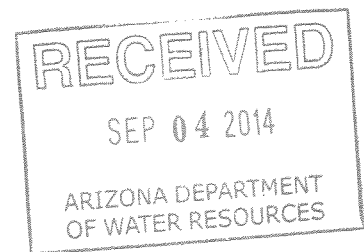


MODIFICATION

ARIZONA DEPARTMENT OF WATER RESOURCES
Water Management Division
3550 North Central Ave, 2nd Floor
Phoenix, Arizona 85012-2105
Phone (602) 771-8500 Fax (602) 771-8689



APPLICATION FOR A RECOVERY WELL PERMIT (§ 45-834.01)

The initial fee for an application for a Recovery Well Permit is \$1,000. Total fees for this application are based upon an hourly billable rate, which can be found on the ADWR web site @ www.azwater.gov. If the costs of reviewing your application exceed \$1,000, you will be invoiced for the difference, up to a maximum total fee of \$10,000. Payment may be made by cash, check, or credit card (if you wish to pay by credit card, please contact the Groundwater Permitting Program at 602-771-8527). Checks should be made payable to the Arizona Department of Water Resources. In addition to the hourly application fee, the applicant must pay any review-related costs associated with the application and the actual cost of mailing or publishing any legal notice of the application or any notice of a pre-decision administrative hearing on the application. Review-related costs are: (1) costs associated with a pre-decision hearing on the application, such as court reporter services and facility rentals for the hearing, and (2) mileage expenses for a site visit conducted before issuing a decision on the application. Failure to enclose the initial application fee will cause the application to be returned. Fees for an application for a Recovery Well Permit are authorized by A.R.S. § 45-871.01 and A.A.C. R12-15-103.

| FOR OFFICE USE ONLY | |
|---------------------|----------------|
| Application No.: | 74-549614.0005 |
| Date Received: | 9/4/14 |

PLEASE SUBMIT ONE ORIGINAL AND TWO COPIES OF THE COMPLETED APPLICATION AND ALL SUPPORTING MATERIALS.

- Name of Applicant: City of Mesa

| | | | |
|---------------------------------------|-------------|-----------|-------------------|
| <u>Water Resources, P.O. Box 1466</u> | <u>Mesa</u> | <u>AZ</u> | <u>85211-1466</u> |
| Mailing Address | City | State | Zip |

| | | |
|------------------------------------|-------------------------------|-------------------------|
| Contact Person <u>Brian Draper</u> | Telephone <u>480-644-3246</u> | Fax <u>480-644-3336</u> |
|------------------------------------|-------------------------------|-------------------------|
- Name of Active Management Area or Irrigation Non-Expansion Area if applicable, and name of groundwater basin and subbasin where the facility will be located Phoenix AMA-East Salt River
- Name of the owner(s) of the land where wellsites are located City of Mesa
Mailing Address Water Resources Department, PO Box 1466, Mesa, AZ 85211-1466
(If more than one owner, attach a list showing corresponding land owner and well registration number(s)).
- Legal description of the land where water will be used City of Mesa Service Area

(quarter/quarter/quarter/section, township and range)

5. The recovered water will be used for service area.
6. The recovery wells will be used to recover water stored pursuant to Water Storage Permit No. _____
or long-term storage account number. 70-441127
7. Complete the following for each constructed well. If data supplied differs from the ADWR well registry, please submit a change of well information form. Attach supplement if needed.

| Name of Well Owner | Well Registration Number | Location: ¼, ¼, ¼, Section, Township, Range | Design Pump Capacity (GPM) | Hole Depth (Feet) | Casing Diameter (inches) | Proposed Annual Volume (Acre-feet) | Date Well Constructed |
|--------------------|--------------------------|---|----------------------------|-------------------|--------------------------|------------------------------------|-----------------------|
| Mesa | 55-583894 | NE, NE, NE, Sec. 18, T 1N, R 5E | 2000 | 1065 | 20 | 1613 | 6/6/2001 |
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8. Complete the following for each proposed well to be constructed.

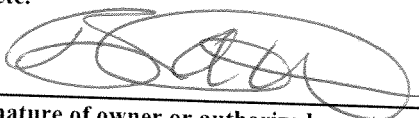
| Well Registration Number | Location: ¼, ¼, ¼, Section, Township, Range | Design Pump Capacity (GPM) | Hole Depth (Feet) | Casing Diameter (inches) | Proposed Annual Volume (Acre-feet) | Estimated Date of New Well Construction | Estimated Time Required To Complete Well |
|--------------------------|---|----------------------------|-------------------|--------------------------|------------------------------------|---|--|
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I (We), Brian Draper, the applicant(s) named in this application, do hereby certify under the penalty of perjury, that the information contained and statements made herein are to the best of my (our) knowledge and belief true, correct and complete.

480-644-3246

Telephone



Signature of owner or authorized agent

Interim Water Resources Advisor

Title

Water Resources, PO Box 1466

Mesa

AZ

85211-1466

Mailing Address

City

State

Zip

STATE OF ARIZONA

County of Maricopa)

) ss.

Subscribed and sworn to before me this 27 day of August, 20 14.

Perla C. Anderson
Notary Public

January 24, 2018
My commission expires:

